

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005894

FILED
Apr 25, 2011
Secretary of State

Entity Name: CULTURAL CENTER "MIRACLE" CORP

Current Principal Place of Business:

5400 BISCAYNE DR
SUITE C
NORTH PORT, FL 34287 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 7485
NORTH PORT, FL 34290 US

New Mailing Address:

FEI Number: 27-2882964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOVALSKY, VLADISLAV D
5400 BISCAYNE DR
SUITE C
NORTH PORT, FL 34287 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: KOVALSKY, VLADISLAV D
Address: 146 MECHANIC ST
City-St-Zip: RED BANK, NJ 07701 US

Title: VPT
Name: MATCHIN, MIRA
Address: 416 HACIENDA ST
City-St-Zip: NORTH PORT, FL 34287 US

Title: S
Name: KOVALSKY, IRINA
Address: 146 MECHANIC ST
City-St-Zip: RED BANK, NJ 07701 US

Title: T
Name: KLAUBER, NORBERT
Address: 5400 S. BISCAYNE DR., STE. C
City-St-Zip: NORTH PORT, FL 34287

Title: D
Name: BRIGGS, DR. ROBERT B
Address: 5400 S. BISCAYNE DR., STE. C
City-St-Zip: NORTH PORT, FL 34287

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MIRA MATCHIN

VPT

04/25/2011

Electronic Signature of Signing Officer or Director

Date